



# System of Care

## WHAT IS THE NEBRASKA BEHAVIORAL HEALTH SYSTEM OF CARE (NESOC)?

System of Care is a framework for designing mental health services and supports for children and youth who have a serious emotional disturbance, and their families, through a collaboration across and involving public and private agencies, families and youth. In Nebraska, it is a new way of doing business that brings together committed partnerships under one umbrella.

A System of Care connects and coordinates the work of State child-serving agencies, nonprofit and local governments, behavioral health care providers, families and patient advocates. It helps children, youth, and families function better at home, in school, in the community, and in life.

In 2013-2014, over 1,000 families, youth, service providers and other stakeholders were involved in the development of a System of Care Strategic Plan. The Nebraska Department of Health and Human Services' Division of Behavioral Health received a grant in 2016 to expand and sustain the System of Care. Partners from across the state are working to implement the elements which were identified through the System of Care strategic plan.

Systems of Care have transformed children's mental health services and improved the lives of children, youth and their families. The approach has gained wide acceptance due to the recognition that children with serious and complex mental health needs are frequently involved with multiple child-serving agencies.

Positive outcomes for children and youth have been achieved through the increased use of home and community-based services and supports. States are coordinating the planning and delivery of services

within a system of care infrastructure that addresses the unique strengths and needs of each child and family.

A statewide readiness assessment was conducted in 2013 among families, youth, service providers and other stakeholders. It identified priority areas including ensuring access to an array of services and supports, coordinating and integrating service and support programs across child-serving agencies, leveraging and maximizing use of all funding sources and monitoring quality and outcomes through a cross-agency approach. To ensure these goals are met and families are being better served, a baseline data analysis was completed as a starting point.

The baseline data for the System of Care, inclusive of data from the Divisions of Medicaid, Behavioral Health, and Children and Family Services/Nebraska Families Collaborative and the Office of Probation, represents 37,996 unique youth involved with any of these agencies for any period of time during FY15.

Nebraska's goals include:

1. Lowering the average age (in years) of first system contact (currently 9.38 years for Nebraska.)
2. Reducing the percentage of youth placed out of home (currently 17.7 percent for Nebraska.)
3. Decreasing the average annual cost per youth (currently \$4,392.90 in Nebraska.)
4. Improve school attendance rate (currently 95.2 percent in Nebraska, according to the Department of Education.) ■

## WHAT SYSTEM OF CARE MEANS TO ME....

By Eve Bleyhl,  
Nebraska Family Support

To me, Nebraska's commitment to implementing a living, breathing System of Care, is a public affirmation that people matter and that the potential of the desired outcomes is worth the considerable time and effort people are putting in.

Coming from a background of poverty and unenlightened family norms, I, early on, internalized shame-based defaults. My experience with public systems, particularly supporting a child through those systems, compounded those gnarly roots. I held a deep and visceral distrust of people representing "systems." My perspective changed once I began to understand that society and the systems it has produced, is as challenged by a lack of healthy functioning as any dysfunctional family. I began to believe that if I, and so many others I have encountered, could work hard to change our family's lives... then systems could surely change as well — after all, systems are made up of people — families are systems of people. Families can change. Systems CAN change.

I began to look for opportunities to participate — to be a part of the change I wanted to see. It was exhilarating to find that many people thought that, as a society, we could do a much better job of supporting children and families

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# CONNECTIONS OVERVIEW

by Barbara Jessing, Clinical Director; and Debra Anderson,  
Senior Director of Early Intervention

Founded in January 2015, the mission of Connections at Project Harmony is to promote hope, healing and resilience for children and families in need through coordinated screening and assessment, improved access to quality services and treatment, and commitment to community education and rigorous research.

Over 60% of all children and adolescents are victimized by violence and trauma each year (Finkelhor et al., 2009). Whether in the form of child maltreatment, bullying, sexual exploitation, domestic violence, or exposure to neighborhood crime, such victimization may result in children experiencing trauma symptoms. They may suffer from nightmares, irritability, trouble concentrating, behavior problems, depression, or anxiety. Despite this, only 20% of children with mental/behavioral problems are identified and receive mental health services (Center for Disease Control, 2013).

Connections is based on the recognition that there is a need in our schools and communities to identify behavioral health concerns early in the lives of children, and offer timely, effective, and family-centered services.

It should be easy for schools, health providers, and parents to find services that help children do better at home, school, and in the community. The groundbreaking findings of the Adverse Childhood Experiences Study (Felitti et al., 1998) make it clear that childhood experiences, both positive and negative, have a tremendous impact on lifelong health and opportunity. Connections builds on the strengths of children, families, and community systems to increase hope, healing, and resilience. Prevention and early intervention are crucial.

## Connections at Project Harmony



Connections focuses on children in kindergarten through eighth grade with the earliest indicators of social and emotional difficulties; and works with their parents, schools, and health care providers to access quality mental health services. Our intention is to offer help to children before they are at risk of child welfare or juvenile justice system involvement. We help professionals recognize and refer children. Then we identify potential barriers to access, and actively work to resolve them.

Connections is funded by private foundations; these resources are augmented by utilizing available health insurance or Medicaid resources that children may have.

### How it Works

The heart of Connections is an active, engaged, and supported referral process. It's distressing to know that only about 20% of children who are identified with a mental health need will eventually get treatment and our mission is to promote access, build family engagement, and remove barriers.

Connections has formal agreements with specific referral sources. These include school districts in the metro Omaha area, as well as the Nebraska Help Line and Children's Physicians Clinics. We provide support and training to our referral sources in recognizing early signs of concern.

Connections creates agreements with community mental health providers to serve the children we refer. Our mental health providers are affiliated with established agencies, clinics, and private practices in the community.

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## UPCOMING EVENTS:

### May 3

4:00 NeSOC Youth Advisory Council Meeting (Lincoln and by Video)

### May 5

6:00–8:00 Nebraska Family Support Network, Children's Mental Health Awareness Event. Spotlighting Children's Mental Health Awareness with a focus on cultural diversity. Ethnic food booths, games, clowns, face painting... community is welcome. (Omaha, Gifford Park, N 33<sup>rd</sup> & Davenport Street)

### May 9

8:00-5:00 Free Mental Health First Aid Training (South Sioux City)

### May 10

9:00 NeSOC Training Work Team Meeting (Lincoln and by Video)

### May 11

9:00 NeSOC Cross-Systems Services and Supports Work Team Meeting (Lincoln and by Video)

### May 17

6:00 Eagle Riders begin the Pony Express Ride Across Nebraska, Benefit Ride for Children's Mental Health Awareness. (Gering)

### May 18

9:00 NeSOC Financial Investment Work Team Meeting (Lincoln and by Video)

9:00 Eagle Riders begin the Pony Express Ride Across Nebraska, Benefit Ride for Children's Mental Health Awareness. (Sidney, North Elementary School)

1:30 Eagle Riders begin the Pony Express Ride Across Nebraska, Benefit Ride for Children's Mental Health Awareness. (North Platte)

3:00 Eagle Riders begin the Pony Express Ride Across Nebraska, Benefit Ride for Children's Mental Health Awareness. (Gothenburg, Pony Express Station)

3:00 NeSOC presentation at NJAA Conference (Kearney)

## REGIONAL UPDATES:



### Region 4

On February 9, we had the System of Care kick-off meeting at Region 4 in Norfolk. Law enforcement, schools, probation, local collaboratives, and Child and Family Services were invited to the meeting. The participants that attended the meeting were region-wide. Along with that, the System of Care plan was presented in Columbus at a juvenile services behavioral health meeting. Lastly, we hope to have our Youth Mobile Crisis Response team up and running by April 1. There have already been discussions with Heartland to set up those services and it will be available to a portion of the region, if not all of it.

### Region 1

Region 1 Behavioral Health Authority in the Panhandle of Nebraska began working on the NeSOC grant by participating on the state work teams and identifying agency and community partners to serve on our Local Implementation Team (LIT), which is scheduled for March 29. The first service need identified was Mobile Youth Crisis Response and we are on track to begin April 1 in the central and southern counties of the Panhandle. The next service identified was for Intensive Outpatient Services for which an RFP will be released with contracts scheduled to be completed by the first of June. If all goes as planned Professional Consultation will be next for implementation. We are excited to be able to offer support to increase services for youth in the Panhandle and to work further with providers and agencies at the local and state level.

### Region 3

Region 3 Behavioral Health Services kicked off its Children's Systems of Care initiative with a Children's Mental Health Summit the morning of March 28 at the Educational Service Unit 10 in Kearney followed by a leadership development and planning meeting of the Region 3 Systems of Care Leadership Council in the afternoon. The summit was attended by parents and system partners from education, child welfare, special education, probation, court appointed special advocates, county attorneys, community collaboratives, behavioral health providers and the Nebraska Children and Families Foundation. The Leadership Council consists of representatives of these child and family-serving entities and will provide guidance for Region 3 Systems of Care implementation.

The presenter and facilitator for the day was Dan Embree, M.Ed., NCC, the CEO of EnRoute Coaching and Training Services, LLC located in Portland, OR. Dan is also a staff member at Portland State University, School of Social Work as Senior Instructor and Systems of Care Consultant and has over 20 years of experience implementing Wraparound and building Systems of Care in rural and urban settings. Dan, a nationally recognized catalyst for helping others develop lasting systems change, provided in-depth information and strategies to build an effective Children's Systems of Care in central and south central Nebraska.

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## UPCOMING EVENTS:

4:30 10th Annual Central Nebraska Children's Mental Health Awareness Celebration, Explore our world! Multi-cultural booths and more fun activity booths for kids to explore their interests! Food and Fun. (Kearney, Buffalo County Fairgrounds Building)

4:45 Eagle Riders begin the Pony Express Ride Across Nebraska, Benefit Ride for Children's Mental Health Awareness. (Kearney, Buffalo County Fairgrounds Building)

### May 19

9:40 Eagle Riders begin the Pony Express Ride Across Nebraska, Benefit Ride for Children's Mental Health Awareness. (Grand Island, Boys Town Shelter)

12:00 Eagle Riders begin the Pony Express Ride Across Nebraska, Benefit Ride for Children's Mental Health Awareness. (York, Epworth Village)

1:45 Eagle Riders begin the Pony Express Ride Across Nebraska, Benefit Ride for Children's Mental Health Awareness. (Columbus)

4:00 Eagle Riders begin the Pony Express Ride Across Nebraska, Benefit Ride for Children's Mental Health Awareness. (Norfolk, Ta-Ha-Zouka Park)

### May 20

10:00 Eagle Riders begin the Pony Express Ride Across Nebraska, Benefit Ride for Children's Mental Health Awareness. (Omaha, Boys Town Main Campus)

1:00 Eagle Riders begin the Pony Express Ride Across Nebraska, Benefit Ride for Children's Mental Health Awareness. (Lincoln)

1:30 Eagle Riders begin the Pony Express Ride Across Nebraska, Benefit Ride for Children's Mental Health Awareness. (Lincoln, State Capitol)

### May 24

1:00 NeSOC Social Marketing and Communication Work Team Meeting (Lincoln and by Video)

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Our providers reserve time in their schedules so that children don't face a long wait once referred. We support our providers with training in evidence based practices that best fit the needs of the children we see.

The Mental Health Coordinator is the key to Connections. When a parent agrees to take part in Connections, the Mental Health Coordinator meets with the family to determine the nature of the child's needs and strengths, what is important to the family, and what changes they hope will result from services. The Mental Health Coordinator identifies with the family any potential barriers they foresee. These often include worries about the cost of treatment, transportation needs, or care for other children during appointments.

The Mental Health Coordinator then makes a match between child and provider. In some cases, the provider is located in the child's school; in other cases, the child is seen in the provider's office. Individual, group, and family therapy are available. During the early engagement stage of treatment, the Mental Health Coordinator checks in frequently so support can be offered as needed. As services continue, the Coordinator monitors and supports progress.

In working with the mental health provider, other family members may be identified as needing mental health services; Connections can include family members in the program.

### **Current Status**

Since the inception of Connections, almost 1500 children and family members have been served. Over 3000 educators have received training about the impact of trauma on children, and approximately 90 metro Omaha schools have received mental health services for their students.

Over 90% of the children served have Medicaid or private insurance available to pay for mental health care. For those without insurance, Connections is the payer of last resort.

More than 80 community mental health providers representing 20 agencies and private practices provide therapy for Connections clients. All providers, along with selected school personnel have had opportunities to attend evidence-based practice trainings as a part of the Connections program. The practices utilized most include Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), Cognitive Behavioral Intervention for Trauma in Schools (CBITS), Bounce Back (the younger version of CBITS), and Support for Students Exposed to Trauma (SSET). Since January 2015, almost 500 providers have received some evidence-based practice training, increasing quality of services not only for Connections clients, but for all clients.

### **Connect with Us**

Connections is about growing the capacity of the community to recognize and support children and families with mental health needs. Growing capacity means that we are building a workforce of mental health providers, at available times and places, who can meet and engage with children and families at the first sign of need. Growing capacity means that our school, health care, and social service systems are more attuned to the pervasive stresses in the lives of children and families, and contribute to a stronger, and trauma-resilient community for us all.

### **In the Future**

An integral part of the Connections Program is rigorous program evaluation. From 2015-2017, we worked with Chapin Hall at the University of Chicago to improve the program delivery and determine the effectiveness of our interventions. More recently, we have engaged Category One to continue the evaluation process in order to ensure we are replicating the methods which produce the best results. ■

**For more information about the program, contact Dr. Deb Anderson at 402-595-1059 or [danderson@projectharmony.com](mailto:danderson@projectharmony.com).**

## **UPCOMING EVENTS:**

8:30-5:00 AMSR Training (Ainsworth)

### **May 26**

9:00 NeSOC Continuous Quality Improvement Work Team Meeting (Lincoln and by Video)

1:00 NeSOC Work Team Co-Chairs Coordination Meeting (Lincoln and by Video)

### **June 7**

NeSOC Youth Advisory Council Meeting (Lincoln and by Video)

### **June 8**

9:00 NeSOC Cross-Systems Services and Supports Work Team Meeting (Lincoln and by Video)

### **June 13**

8:00-5:00 Free Youth Mental Health First Aid Training (Columbus)

8:00-5:00 Free Mental Health First Aid Training- (Atkinson)

### **June 14**

9:00 NeSOC Training Work Team Meeting (Lincoln and by Video)

### **June 15**

9:00 NeSOC Financial Investment Work Team (Lincoln and by Video)

### **June 23**

9:00 NeSOC Continuous Quality Improvement Work Team Meeting (Lincoln and by Video)

1:00 NeSOC Work Team Co-Chairs Coordination Meeting (Lincoln and by Video)

### **June 28**

9:00 NeSOC Implementation Committee Meeting (Lincoln and by Video)

1:00 NeSOC Social Marketing and Communication Work Team Meeting (Lincoln and by Video)

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Region 3 presented their collaborative Youth Crisis System model that includes Youth Crisis Response, Youth and Family Peer Support, Professional Consultation and Coaching, and Care Management that will begin implementation in May 2017.

May is Children's Mental Health Awareness Month and system partners are supporting Families CARE's 10 Annual Children's Mental Health Celebration: Partnering for Hope & Healing scheduled for May 18 from 4:30-7:00 p.m. at the Buffalo County Fairgrounds in Kearney. For more information about Partnering for Hope & Healing Celebration contact Families CARE at 308-237-1102.

For more information about Region 3 Behavioral Health Services Systems of Care please contact Beth Baxter at 308-440-5481 or Jill Schubauer at 308-440-9135.

## **Region 2**

Region II Crisis Response is moving forward. Mental Health providers are being recruited and we are developing

a marketing strategy for the 17 counties covered by Region II. We are on track for our go live scheduled date May 1.

A Memorandum of Agreement was signed with ESU #16 and they have hired an LIMHP to provide mental health services in rural schools served by ESU #16. Region II and ESU #16 are collaborating to complete the grant data collection.

Starting March 1 the Youth Care Coordination Program expanded capacity by 13 new slots. We have hired an additional staff person and are gathering the required data for families served by the grant.

The first Regional NeSOC meeting was held and Nathan and Bernie provided basic NeSOC 101 training. We will be meeting quarterly.

Speak Out and the Region are working on a Memorandum of Agreement to expand services in the Region II area. The family organization has purposed developing a family mentoring network in our area. ■

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who are struggling. Many great minds with great hearts and a burning desire to support holistic healing, had been at work for years to try and figure out how we could honor the individual needs of all citizens, while juggling the many faceted demands and needs of society at large.

What I longed to see happen was very much in progress. I felt honored to be even a microscopic part of this process of positive change.

Then I came to understand that systems change can be excruciatingly slow, excitement and enthusiasm wanes...people fall away, funding and philosophies shift, momentum sputters...it is easy to just want to give up. What excites me is that we DON'T give up — we keep trying and we do keep making progress. The potential for better outcomes for children and families — thus society at large, continues to flourish. The only thing that keeps the Guiding Principles of System of Care alive is that we keep trying. Yay for us! ■

## **NeSOC Collaborative**

- Nebraska Children and Families Foundation
- Nebraska Department of Education
- Administrative Office of Probation
- Regional Behavioral Health Authorities
- Family Organizations:
  - Speak Out: Scottsbluff and North Platte
  - Families Care: Kearney
  - Parent to Parent Network: Norfolk
  - Families Inspiring Families: Lincoln
  - Healthy Families Project: Lincoln
  - NE Family Support Network: Omaha
- Department of Health and Human Services
- DHHS Office of Consumer Affairs

## **NeSOC Priority Outcomes**

- Decrease the proportion of youth who report living in a setting that is not their home (i.e. foster care, jail, prison or hospital).
- Increase the number of children and youth who attend school regularly.
- Decrease costs per youth receiving services.
- Decrease in average age of first system contact.

## **To learn more about NeSOC:**

- [http://dhhs.ne.gov/behavioral\\_health/Pages/beh\\_systemofcare.aspx](http://dhhs.ne.gov/behavioral_health/Pages/beh_systemofcare.aspx)
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